DEC 0 5 2006

PTO/SB/22 (12-04)
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o a collection of information unless it displays a valid OMB control number.

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ETITION FOR EXTENSION OF TIME	Docket Number (Optional)								
FY 2000	283_381								
(Fees pursuant to the Consolidated Appr									
Application Number 10/664,581			Filed: September 17, 2003						
For: Apparatus And Method for Verifying Print Quality Of An Encoded Indicium									
Art Unit 2876		Examiner Kimberly D. Nguyen							
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.									
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):									
	<u>Fee</u>	Small Entity	<u>Fee</u>						
☐ One month (37 CFR 1.17(a)(1))	\$120	\$60	\$						
☑ Two month (37 CFR 1.17(a)(2))	\$450	\$225	\$ <u>450.00</u>						
☐ Three month (37 CFR 1.17(a)(3))	\$1020	\$510	\$						
☐ Four month (37 CFR 1.17(a)(4))	\$1590	\$795	\$						
☐ Five month (37 CFR 1.17(a)(5))	\$2160	\$1080	\$						
☐ Applicant claims small entity status. See 37 CFR 1.27.									
A check in the amount of the fee is enclosed.									
Payment by credit card. Form PTO-2038 is attached.									
☐ The Director has already been authorized to charge fees in this application to a Deposit Account.									
☐ The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>50-0289</u> . I have enclosed a duplicate copy of this sheet.									
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.									
I am the ☐ applicant/invent	or.								
	ord of the entire inter der 37 CFR 3.73(b) i								
attorney or agent of record. Registration Number									
	nt under 37 CFR 1.3 mber if acting under 37		3						
December 5, 2006		R.5	Mudalm						
Date 315-425-9000			Signature t. Stephen Rosenholm						
Telephone Number	Typed or printed name								
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.									
☐ Total of 1 forms are submitted.									

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			reduction Act of	of 1995 no persons are required to respond to a collection of information unless it displays a valid OMB control number Complete if Known									
Fees pursuant to the Consolidated Appropriations Act. 2005 (H.R. 4818).				Application Number 10/664,581									
EC O 5 2006FIJE TRANSMITTAL				Filing Date September 17,				003					
T For FY 2006			_	First Named Inventor Charles E. Biss									
LOU LA SAAA				<u> </u>	0.100 3. 3.00				iven		· · · · · ·		
Applicant claim	ns small enti	tv status. See 37	CFR 1.27		Examiner Name Kimberly D. Nguye Art Unit 2876								
TOTAL AMOU			\$450.00		Attorney Docket No. 283-381								
Express Mail Label No. EV969121405US													
METHOD OF PAYMENT (check all that apply)													
Check Credit Card Money Order None Other (please identify):													
Deposit Account Deposit Account Number: 50-0289 Deposit Account Name: Wall Marjama & Bilinski LLP													
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)													
☐ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee													
☐ Charge any additional fee(s) or underpayments ☐ Credit any overpayments													
of fee(s) under 37 CFR 1.16 and 1.17													
WARNING: Info information and a	rmation on uthorizatio	this form may	become public.	Credit car	d information sh	ould not be in	cluded	on this fo	rm. Pi	ovide	credit card		
FEE CALCULA													
		CH, AND EXA	AMINATION	FEES	·								
1. BASIC FILING, SEARCH, AND EXAMINATION FEES FILING FEES SI					EARCH FEES EXAMINATION FE			ON FEES					
	Small Entity				Small Entity		Small Entity						
Application Type	2	Fee (\$)	Fee (\$)	Fee (\$)		Fee (\$)			s Paid (\$)				
Utility		300	150	500	250	200	100						
Design		200	100	100	50	130	65						
Plant		200	100	300	150	160	80						
Reissue		300	150	500	250	600	300						
Provisional		200	100	0	0	0		0					
2. EXCESS CLA	AIM FEES	S									Small Entity		
Fee Description									Fe	e (\$)	Fee (\$)		
Each claim over 2	20 (includi	ng Reissues)							50		25		
Each independent		er 3 (including l	Reissues)	-					200	1	100		
Multiple depende	nt claims								360		180		
Total Claims Extra Claims			Fee (\$)		Fee Paid (\$)			Multiple Dependent Claims					
		- 20 or HP =		х		=			Fee (<u>s)</u>	Fee Paid (\$)		
HP= highest paid n	umber of tot	tal claims paid fo	or if greater than	20	1		 						
Indep. Claims	1	para :	Extra Claims	Ť	Fee (\$)		Fee P	aid (\$)					
- 3 or HP = >		х		=									
HP =highest number	er of indeper	ndent claims paid	for, if greater th	an 3	•								
3. APPLICATIO													
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a) (1)(G) and 37 CFR 1.16(s).													
Total Sheets		Extra Sheets Number of each additional 50 or fraction thereof Fee (\$)							Fee Paid (\$)				
-100 = /50 = (round up to a whole number) x =													
4. OTHER FEES										Fees Paid (\$)450.00			
Non-English Spec			nall entity disco	unt)							\$450.00		
Other: Two month extension fee													
SUBMITTED B	Υ												

R. Stephen Rosenholm

Signature

Name (Print/Type)

Registration No. 45,283 (Attorney/Agent)

Telephone 315-425-9000

Date December 5, 2006